

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/596675

FILING DATE

6-21-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		1		1		
4		1		1		
5		1		1		
6		1		1		
7		1		1		
8		1		1		
9		1		1		
10		1		1		
11		1		1		
12		1		1		
13		1		1		
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16		1		1		
17		1		1		
18		1		1		
19		1		1		
20		1		1		
21		1		1		
22	1		1			
23		1		1		
24		1		1		
25	1		1			
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28		1		1		
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30		1		1		
31	1		1			
32		1		1		
33		1		1		
34		1		1		
35		1		1		
36		1		1		
37	1		1			
38		1		1		
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40		1		1		
41		1		1		
42		1		1		
43		1		1		
44		1		1		
45		1		1		
46		1		1		
47		1		1		
48		1		1		
49		1		1		
50		1		1		
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↑		↑		↑
TOTAL CLAIMS						

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		1		1		
52		1		1		
53		1		1		
54		1		1		
55		1		1		
56	1		1			
57		1		1		
58		1		1		
59				1		
60				1		
61				1		
62				1		
63				1		
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	6	↓	7	↓		↓
TOTAL DEP.	52	←	60	←		←
TOTAL CLAIMS	58		67			